Annual Report of Animal Waste Discharge

Santa Ana Regional Water Quality Control Board 3737 Main Street, Suite 500 Riverside, CA 92501-3348 (951) 782-4130

Reporting Period:

January 1, 2012 to December 31, 2012

Report Due Date:

January 15, 2013

			/
Facility Informatio	on (Please make corrections directly on this form)	200000ccccation40000000cccpcccccctcr4860gpcpcpcccccccccc2gggsquagecccc	Managadanan 144 Sanan
Operator's Name	Gerben Hettinga		
Facility Name	GH Dairy #1		
Facility Address			
Mailing Address	Ex. 6 Personal Privacy (PP)		
Telephone Number			**************************************

Does the information provided apply only to the facility address indicated above?

Yes

□ No

If No, please provide the name and address of the other facilities in the Comments section of this report.

Note: Submit a separate report for each of your facilities including dry cow, heifer, and calf ranches.

Animal Population	Manure Information
No. Milking Cows 1,101 No. Dry Cows 233 No. Heifers 1,343 No. Calves 1,303 Others 38	Units used below: tons cubic yards Amount of manure spread on cropland at the facility: Amount of manure hauled away from your facility: (Please provide copies of all Manure Tracking Manifests showing the hauler name and the destination of the manure.) Amount of manure produced in 2012 that is stockpiled on site as of 12/31/2012:

Were the production factors provided below used to estimate your manure information?



No

I have complied with Special Provisions Section VII.C.5.f. of Order No. R8-2007-0001 by providing nutrient analysis for the transferred manure.

	Vo
L	re

☐ No

- 1 Milking cow produces approximately 4.1 tons per year of manure.
- 1 Heifer produces approximately 1.5 tons per year of manure.
- 1 ton of corral manure equals 2.32 cubic yards.

- 1 Dry cow produces approximately 4.1 tons per year of manure.
- 1 Calf produces approximately 0.6 tons per year of manure.
- 1 cubic yard of corral manure equals 0.43 tons.

Page 1 of 2

Last Revised: 11/12

Annual Summary Report of CAFO Weekly Storm Water Management Structure Inspections

reporting Feri	* '		
Facility Infor	mation (Please make correction	s directly on this form)	
Operator's Na	ame Gerben Hettinga		
Facility Name	GH Dairy #1		
Facility Addre	ss Ex. 6 Personal Priv	acy (PP)	
i	eekly Storm Water Management Structu in why the log sheet was not completed		for the entire year? Yes No
		· · ·	te inspection?), how long did the discharge
Date of incident	How was it discovered?	How long did it last?	How was it stopped?
			·
ystem designed to erson or persons he best of my kr	to assure that qualified personnel prop	erly gather and evaluate the infonons directly responsible for gathering to complete. I am aware that the	ny direction or supervision in accordance with mation submitted. Based on my inquiry of th g the information, the information submitted is, t re are significant penalties for submitting fals
	aking this report (please print).	tricia L Mol Obroller	
	Signature:	aturia Z M	1 om

Annual Summary Report of CAFO Weekly Storm Water Management Structure Inspections

Reporting Perio	d: January 1, 2012 to D		***
Facility Inform	nation (Please make correction	ns directly on this form)	
Operator's Na	me Gerben Hettinga		
Facility Name	GH Dairy #1		
Facility Addres	Ex. 6 Personal F	Privacy (PP)	
	ekly Storm Water Management Struct n why the log sheet was not complete	ure Inspections Log Sheet completed for the entire year.	or the entire year? Yes No 🗌
=		<i>/</i> \	te inspection?), how long did the discharge
Date of incident	How was it discovered?	How long did it last?	How was it stopped?
Certification:			
ystem designed to erson or persons v he best of my kno	o assure that qualified personnel pro who manage the system, or those pers	perly gather and evaluate the informations of the period of the second o	direction or supervision in accordance with a ation submitted. Based on my inquiry of the the information, the information submitted is, to are significant penalties for submitting false
lame of person ma	king this report (please print)	obroiler ,	
	Signature:	MALAININ Y M	(Me)

Report	ing Perio	d:	1/,	1/2012 - 12/31/2012		
	Name:	and which was a second with an analysis of the second with a se		GH Dairy #1		
Neek	Date	Initials	ок	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
1	11-117				0'	1-7-12
2	1/18-1/14				0'	1-14-12
3	1/13/1/21				0'	1-21-12
4	1/20/1/24				0'	1-28-12
5	1/29-2/1	4			0'	2-4-12
6	的	11			0'	2-11-12
7	3/13	18			0'	2-18-12
8	2/19/21	13		·	0'	2-24-19

B-6

Reporting Period:	1/1/2012 - 12/31/2012	
Facility Name:	GH Dairy #1	

Week	Date	Initials	ок	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
9	3/3 12/2				0	3-3-12
10	3/10				0'	3-10-12
11	3/11/3/17				0'	3-17-12
12	3/18.3/2			put Heifer To eat up weed	0'	3-24-12
13	36534	الا			0'	3-31-12
14	411-41)			0'	4-7.12
15	4/4-4/	14			3'	4-12-12
16	: I 4	by			4'	4-2127
1		bis			41	4-2842

Reporting Period	11/2012 - 12/31/2012
Facility Name:	- GH Dairy # 1

Week	Date	Initials	OK	Notes (Note any problems found and how problems were remedied)	Waste Pond	Date
18	11295			in the state of th	Freeboard 3	Corrected
19	5/12				3'	5-12-12
20	3/19 3/13				2'	5-19-12
21	5bo			•	2′	5-26-12
22	40,000				<i>F</i> ′	6-2-12
23	0/3.6/9				1'	6-9-12
24	ماراه فرازه				1'	6-16-12
25	4/2-4/3				0	6-23-18
26	eby leby)		Put Hiefer To eatweed up	0	6-30-12

Reporting Period:	1/1/2012 - 12/31/2012
Facility Name:	GH Dairy #1

				0		
Week	Date	Initials	ок	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
27	11-7/7				0'	7-7-12
28	7/8-7/14				o'	7-14-12
29	7/5 761				o'	7-21-12
30	1/20-1/24 1/24				0'	7-28-12
31	7/29-4/4			put Heifer to ent weed up	o'	8-4-12
32	813.8/11		·		0'	8-11-12
33	2/12/18	,		•	0	8-18-12
34	3/19/56/24				0	8-24/8
35	9/26/26/2011				0	9-142

Reporting Period:	1/1/2012 - 12/31/2012
Facility Name:	GH Dairy #1

Week	Date	initials	ОК	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
36	9/8				0	9-7-12
37	19-9/15				0	9-15-12
38	9/16-9/2				0	9-22-12
39	963-96		-	**	0	9-28-12
40 ,	1930 1930				0	10-6-12
41	10/1/10/1	,		put Heifer to eat weed up	0	16-13-12
42	10/14-10/	Ó			0	10-19-17
43	10/91/10/	ħ			0	16-77-1
44	ppe_//	3			0	11-3-12

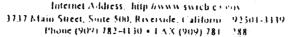
Reporting Period:	1/1/2012 - 12/31/2012	
Facility Name:	GH Dairy #1	

Week	Date	Initials	ок	Notes (Note any problems found and how problems were remedied)	Waste Pond Freeboard	Date Corrected
45	114-11/10				0'	11-10-12
46	1/11/1/1	1			0'	11-16-17
47	11/8/1/9	1			0'	11-24-12
48	1135				1'	12 0-12
49	13/	4	-		2'	12-8-12
50	13/9	119			3'	12/4/7
51	ناراها	162		Put Heifer to eatup weed	3'	12-21-12
52	2 2/25	241			3'	12-31-12

Cantornia Regional Water Quality Control Board

Santa Ana Region







MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. A hauling event may involve many loads and may last for several days, as long as the manure is being hauled to one destination. Please note that separate forms must be completed for each different destination.

and the same of th			
Operator's Name: J	ESUS PULIDO		
Facility Name: G.H	. DAIRY # !		
1. Amount of Manur	e Hauled		
# of loads haul	ed:13 4	Truck capa	city irreubic yards:
Total # of cubic	; yards hauled:	Me	oth hauled
2. Hauler's Name	PULIDO CORRA	L SERVICES	
hauled. If the manure address, nearest cross located).	e was hauled to s streets, or prov	a location other than ide a map of the site	ting facility where the manure was a composting facility, write in the and the county where that site is
A. Compos	sting facility name		
B. Alternat	e site address or	nearest cross streets	(only if not a composting facility)
:		Domenigont B	ros. Ranch
: :	.4.	Winchester,	Ca.
(County:	Riverside	
I certify under penalty the best of my knowled		information provided	I on this form is true and correct to
Operator's signature	1	Aft too	Date#10 - 03 - 2012
Hauler's signature:	ANG	fish	Date: 444-03-2012
	nure hauling ev	ent. Each complete	confinement facility operator upon diform shall be submitted with the
	California E.	vironmental Protecti	ay Aganay
	vangvinia Lii	ru ommemuu 4 i oleem	un rigeney

Recycled Paper

Winston H. Hickor Secretary for Environmental Protection

Camornia Kagional Water Quality Control Board

Santa Ana Region



Internet Address. http://www.swrcb.co.eov. 3737 Main Street, Soite 500, Riverside, Californi - 92501-3439 Phone (909) 782-4130 • UAX (909) 781 - 288

MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. A hauling event may involve many loads and may last for several days, as long as the manure is being hauled to one destination. Please note that separate forms must be completed for each different destination.

Operator's Name: Jesus Pulido
Facility Name: G.H. DAIRY # 1
1. Amount of Manure Hauled
of loads hauled:
Total # of cubic yards hauled: Month hauled
2. <u>Hauler's Name</u> Pulido Corrai Services
3. <u>Destination of Manure</u> (Write in the name of the composting facility where the manure was hauled. If the manure was hauled to a location other than a composting facility, write in the address, nearest cross streets, or provide a map of the site, and the county where that site is located).
A. Composting facility name:
B. Alternate site address or nearest cross streets (only if not a composting facility)
Domenigoni Bros. Ranch
Winchester,,Ca.
County:
I certify under penalty of perjury that the information provided on this form is true and correct to the best of my knowledge and belief. Operator's signature: Date: MAY - 18 - 2012 This form must be returned by the hauler to the animal confinement facility operator upon completion of each manure hauling event. Each completed form shall be submitted with the animal confinement facility's annual report.

California Environmental Protection Agency

Recycled Paper

Winston II. Hickox Secretary for Environmental Protection

Cantornia Regional Water Quality Control Board

Santa Ana Region

Internet Address, http://www.swrcb.co.oox 3737 Main Street, Soite 500, Riverside, Californi - 92501-3339 Phone (909) 782-4130 + UAX (909) 781 - 288



MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. A hauling event may involve many loads and may last for several days, as long as the manure is being hauled to one destination. Please note that separate forms must be completed for each different destination.

Operator's Name: Jesus Pulido
Facility Name: Hein Hettinga Eucalyptus Dairy
1. Amount of Manure Hauled
of loads hauled: 79 Truck capacity in cubic yards
Total # of cubic yards hauled: Month hauled
2. <u>Hauler's Name</u> Pulido Corral Services
3. <u>Destination of Manure</u> (Write in the name of the composting facility where the manure was hauled. If the manure was hauled to a location other than a composting facility, write in the address, nearest cross streets, or provide a map of the site, and the county where that site is located).
A. Composting facility name:
B. Alternate site address or nearest cross streets (only if not a composting facility)
Domenigoni Bros, Ranch
Winchester, Ca.
County: Riverside
I certify under penalty of perjury that the information provided on this form is true and correct to the best of my knowledge and belief.
Operator's signature: Date: All 03-2012
Operator's signature: Date: All - 03 - 2012 Date: All - 03 - 2012
This form must be returned by the hauler to the animal confinement facility operator upon completion of each manure hauling event. Each completed form shall be submitted with the animal confinement facility's annual report.
California Environmental Protection Agency
Recycled Paper

Manure Tracking Manifest Santa Ana Regional Water Quality Control Board

manure is being hauled to the same destination. 2) If there are multiple destinations, complete a separat 3) The operator must obtain the signature of the hauler	
Operator Information	
Name of the Operator:	
Name of Facility: GH #1	
Facility Address:	
Mailing Address:	
Phone Number:	
Manure Hauler Information	
Name of Hauling Company and Contact Person: Lupe Franco	
Phone Number: Business: 9000004 Mobil Ex. 8 Personal Pri	ivacy (PP)
Destination Information	
Hauled To (please check one):	Dates Hauled: 11-2-12 11-3-12
Composting Facility	Please give the name and location of the composting operation, or, if the
Riverside County	manure was hauled to cropland, the owner or tenant, and the destination address, or nearest cross streets.
Ci Riverside County	Farm Fields
San Bernardino County	address, or nearest cross streets: Farm Fields Sam Lewis farms
Other County:	Sam Lewis 14rms
	Ex. 6 Personal Privacy (PP)
	Corona CA.
Amount Hauled (enter the amount in the box below and in	dicate what units are used):
440 4Tons	CUBIC YARDS
Certification: All of the statements contained herein are true and correct	to the best of my knowledge and are submitted under penalty of perjury.
Operator's Signature: Hauler's Signature: My framed	Date:

12/2000

MANURE TRACKING MANIFEST FORM

Operator	's Nam	ne:	
Facility	Name:		
Facility	Addre	ess:	
Mailing 1	Addres	s:	
Phone Nur	mber:		
Hauler's	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	Larry T. Martinez Phone No.	Ex. 6 Personal Privacy (PP
Amount Ha	nuled:	864 Tons or Cubic Yards Date(s) H 8. Tons per Loads	lauled: <u>//-/2-20/2</u> //-/9-20/2

	ъетл	itted Compost Operation (Mame):	
		•	
	Othe	r: <u>Within Riverside, San Bernardino or Orange</u> site name and location below. Use address; Range, if known; or the nearest cross stre	Section, Township, eets)
	Othe	r: <u>Within Riverside, San Bernardino or Orange</u> site name and location below. Use address;	Section, Township, eets)
	Othe	r: <u>Within Riverside, San Bernardino or Orange</u> site name and location below. Use address; Range, if known; or the nearest cross stre	Section, Township, eets)
	Othe	within Riverside, San Bernardino or Orange site name and location below. Use address; Range, if known; or the nearest cross street Red Stan Ex. 6 Personal Procession Ex. 6 Personal Procession Red Stan Ex. 6 Personal Procession Red	Section, Township, eets) rivacy (PP) e Counties (List the
	Othe	within Riverside. San Bernardino or Orange site name and location below. Use address; Range, if known; or the nearest cross strength Ex. 6 Personal Pi Corona Ca 92882 Outside Riverside, San Bernardino or Orange	Section, Township, eets) rivacy (PP) e Counties (List the
I certify Manure Tr	Othe	within Riverside, San Bernardino or Orange site name and location below. Use address; Range, if known; or the nearest cross strength Ex. 6 Personal Plants Corona Ca 92882 Outside Riverside, San Bernardino or Orange general location, such as city and county)	Section, Township, eets) rivacy (PP) counties (List the provided in this
I certify Manure Tr	Othe	within Riverside, San Bernardino or Orange site name and location below. Use address; Range, it known; or the nearest cross street. Red Stan Ex. 6 Personal Processide Reverside. San Bernardino or Orange general location, such as city and country. Riverside Country The penalty of perjury that the information of Manifest form and in any attachments is the knowledge and belief.	Section, Township, eets) rivacy (PP) e Counties (List the) on provided in this true and correct to

the Regional Water Quality Control Board by January 15 of each year al

part of his/her annual report.

MANURE TRACKING MANIFEST FORM

This form must be completed for each manure hauling event. Only one form is necessary even though a hauling event may involve several loads and may last

Operator's	s Name	**************************************				
Facility ?	Name:	SOL AND THE CONTRACT OF THE				
Facility A	Addres	\$ \$ \$Only/Exclabely/Magazine/Aga				
Mailing Ad	ddress	Where the Representation of the Section of the Sect	-			
Phone Numb	ber:		,			
their state date with state of the fifth state and			root was well will all one was the said that the way the said the said the said the said the said the said the		. "	nt ann ann ann ann ann ann ann ann ann a
Hauler's N	lame: _	Larry T.	Martinez	Phone No.	Ex. 6 Perso	onal Privacy (PP)
Amount Hau	iled:	1368 To	ns or Cubic Yards	Date(s)	Hauled: 🔟	1-20-2012
Hauled To:	:	8, Tons Per	ns or Cubic Yards (circle one) r Load		11	- 28-2012
			Operation (Name):			
	*					
		Paralle Paragonal de la companya de	·	The hand of the second		and the second s
	Other:					nuggarhaninganinganing
	<u></u>		de, San Bernardin location below. U			
		te name and inge, 12 know	location below. U	se address cross str	; Section, reets)	Township,
		te name and inge, 12 know	location below. U	se address cross str	; Section, reets)	Township,
		te name and inge, 12 know	location below. U	se address cross str	; Section, reets)	Township,
		te name and inge, it know Star CoRountside Rivers	location below. Uva; or the nearest Ex. 6 Pers La Ca, 9 Ide, San Bernardi	se address cross stronal Privace 2882	; Section, ceets) vacy (PP)	Township,
		te name and inge, it know Star CoRountside Rivers	location below. Uva; or the nearest Ex. 6 Pers A Ca. 9	se address cross stronal Privace 2882	; Section, ceets) vacy (PP)	Township,
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100 Till Sid Cit Till App 150 July 200		Red Star CoRosentside Rivers	Ex. 6 Pers Ex. 6 Pers A Ca. 9 Ide, San Bernardi ion, such as city	onal Priv	; Section, reets) Yacy (PP) Te Counties	(List the
I certify :	under acking	Red Star CoRosentside Rivers eneral location	Ex. 6 Pers Ex. 6 Pers A Ca. 9 Ide, San Bernardi ion, such as city of perjury that the a and in any attack	se address cross stronal Priverse and county and county	; Section, reets) /acy (PP) // (PP)	(List the
I certify :	under acking of my k	Red Sta CoRos atside Rivers eneral locati he penalty of lanifest form lowledge and	Ex. 6 Pers Ex. 6 Pers A Ca. 9 Ide, San Bernardi ion, such as city of perjury that the a and in any attack	cross stronal Privace on all Privace on all Privace on a county and county on a county on	; Section, reets) /acy (PP) // (e Counties /) ion provide true and continue and	(List the

completed form shall be submitted by the animal confinement facility operator the Ragional Water Quality Control Board by January 15 of each year 43

part of his/her annual report.